

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

For Official Use

State of Wisconsin, Plaintiff,
-VS-

☐ Amended

**Notice to DNR of
Court Ordered Revocation**

_____, Defendant

Name

Address

Case No. _____

Address (City, State, Zip)

DESCRIPTOR INFORMATION

Date of Birth	Sex	Race	Height	Weight	Hair color	Eye color
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Identifying Characteristics:

Court Directive

Effective Date of Revocation

☐ Court Ordered Revocation for Failure to Pay

From:

To:

☐ Court Ordered Revocation

Type of Privilege Revoked

☐ Court Ordered Revocation Amended

☐ All Hunting Privileges and Approvals

☐ Vacate Court Order of Revocation

☐ All Fishing Privileges and Approvals

☐ Stay Revocation

☐ All Trapping Privileges and Approvals

☐ Revocation Dismissed

☐ All Chapter 29 Privileges and Approvals

☐ Revocation Lifted

☐ Other: (specify) _____

Violation Date

DNR Citation No.

Conviction Date

Statute No. Violated

Statute Severity

Description of Charge

Sentence Details

Special Instructions or Comments

BY THE COURT:

Name of Court

Address

Address

City, State, Zip

Phone Number

Circuit Court Judge / Clerk of Circuit Court

Name Printed or Typed

Date